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FOX ROTHSC P O BOX 592 112 NASSAU S	CHILD LLP TREET	772008	I he Stat add tran	Certifi reby certify that this less Postal Service with ressed to the Mail S smitted to the USPTO	cate of Mailing or Transifec(s) Transmittal is being sufficient postage for firstop ISSUE FEE address (571) 273-2885, on the day	nission deposited with the United t class mail in an envelope above, or being facsimile ate indicated below.
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				/at/	Sutel	(Signature)
			J	amuary 15, 2	009	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		TTORNEY DOCKET NO.	CONFIRMATION NO.
10/597,965	965 08/14/2006		Magnus Aslund		P32379 USA	8594
ITLE OF INVENTION:	: METHOD AND ARR.	ANGEMENT RELATING	G TO X-RAY IMAGING			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FI	EE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	01/20/2009
EXAMI	NER	ART UNIT	CLASS-SUBCLASS			
SONG, H	OON K	2882	378-096000			
Change of correspondence address or indication of "Fee Address" (37 FR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  Fox Rothschild LLP			
	ess an assignee is ident in 37 CFR 3.11. Comp		I THE PATENT (print or type data will appear on the pa T a substitute for filing an a (B) RESIDENCE: (CITY	ntent. If an assignee in assignment.		cument has been filed for
SECTRA MAMEA Kistagangen 2, Kista, Sweden S-164 40						
case check the appropriate assignce category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🔲 Government						
The following fee(s) as  Issue Fee Publication Fee (No Advance Order - #	o small entity discount p	ermitted)	D. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1943 (enclose an extra copy of this form).			
□ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).						
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Authorized Signature Date January 15, 2009						
Typed or printed name Peter J. Butch			Registration No. 32,203			
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